

**Frequently Asked Questions
about
H.R. 818, the Federal Acupuncture Coverage Act**

Q: What does HR 818 do?

A: The Federal Acupuncture Coverage Act would add acupuncture as a guaranteed benefit under Medicare and the Federal Employees Health Benefits (FEHB) program.

Q: Why is HR 818 necessary?

A: Medicare and FEHB insure a total of 49 million Americans. Without coverage for acupuncture by these plans, nearly one-fourth of the population is effectively denied the ability to choose acupuncture treatments. The passage of legislation is necessary to add acupuncture as a guaranteed benefit under both programs and to ensure that licensed, registered and certified acupuncturists are covered providers.

Q: Which acupuncture providers are covered by HR 818?

A: The legislation calls for coverage of acupuncture services provided by state licensed, certified or registered acupuncturists. This is an intentionally broad definition of acupuncturist in order to cover the full range of accreditation mechanisms provided under various state laws. If enacted, a more detailed definition of a "qualified acupuncturist" will be worked out during the regulatory process.

Q: Which acupuncture procedures or CPT codes would be covered under HR 818?

A: The legislation does not specify individual procedures that would be covered; it would be highly unusual for any federal legislation to have that level of detail. Such decisions are made during the regulatory process, which commences after a bill is signed into law. The appropriate Executive Branch agency -- the Centers for Medicare and Medicaid Services and the Office of Personnel Management, in this case -- will propose detailed regulations for implementation of the law.

Q: Why does the Federal Acupuncture Coverage Act have a different bill number this year?

A: The House of Representatives runs in two-year terms. Legislation that has not been passed by the end of a term must be reintroduced in the new term of Congress. Most of the time, the bill will be assigned a new bill number. Because the Federal Acupuncture Coverage Act did not pass during the 108th Congress, which ended in December 2004, it had to be reintroduced in 2005 for the 109th Congress. Although the bill's number was HR 1477 last year, it is assigned HR 818 for the next two years.

Q: If HR 818 is enacted, will acupuncturists be forced to accept Medicare and FEHB patients?

A: Absolutely not. No health care provider is forced to accept Medicare patients. Under FEHB, all health care is insured by private insurance companies; it is entirely up to each practitioner whether he/she wishes to negotiate a contract with any of the insurance companies in his/her area that provides coverage to federal workers and retirees.

Q: Who supports HR 818?

A: The Federal Acupuncture Coverage Act has been endorsed by the AOM Alliance, the Acupuncture and Oriental Medicine National Coalition (AOMNC) and the Council of Acupuncture and Oriental Medicine Associations (CAOMA).

Q: Is the federal government researching acupuncture?

A: Yes. Through the National Center for Complementary and Alternative Medicine, a branch of the National Institutes of Health (NIH), there is ongoing research into the effectiveness of and applications for acupuncture. The NIH maintains a website with general information about acupuncture and provides links to study results and ongoing clinical trials at <http://nccam.nih.gov/health/acupuncture/>.